

MICHIGAN REGIONAL TRAUMA REPORT

2nd QUARTER 2021

Region 3

Statutory Reference: R325.132 Rule 8 (3) (a) At least quarterly, a region shall submit evidence of ongoing activity, such as meeting notices, minutes to the department.

Resource Update: Facility Designation Status:

Facility Name	Designated	Level of Designation
Hurley Medical Center-Flint	Yes	I
Ascension Genesys Medical Center-Grand Blanc	Yes	II
Ascension St. Mary's-Saginaw	Yes	II
Covenant Medical Center-Saginaw	Yes	II
McLaren Bay Region-Bay City	Yes	II
McLaren Lapeer Region-Lapeer	Yes	II
Mid-Michigan Medical Center-Midland	Yes	II
McLaren Flint	Yes	III
Ascension St. Joseph-Tawas	Yes	IV
Ascension Standish Hospital-Standish	Yes	IV
Deckerville Community Hospital-Deckerville	Yes	IV
Harbor Beach Community Hospital-Harbor Beach	Yes	IV
Hills and Dales General Hospital-Cass City	Yes	IV
Marlette Regional Hospital-Marlette	Yes	IV
McKenzie Memorial Hospital-Sandusky	Yes	IV
McLaren Caro Region-Caro	Yes	IV

Scheurer Hospital-Pigeon	Yes	IV
McLaren Thumb Region-Bad Axe	Yes	Provisional
Mid-Michigan Medical Center-Gladwin	Yes	Provisional
Mid-Michigan Medical Center-West Branch	Yes	Provisional

Work Plan Objective Progress and Highlights:

Injury Prevention

Objective: The Region 3 Trauma Network will develop a regional injury prevention plan and have it in place by 2021.

Progress: The Region 3 Injury Prevention Subcommittee has increased the frequency of their scheduled meetings. The increased meetings have been helpful communicating and executing workplan objectives. Progress continues to be made creating the Regional Injury Prevention Plan. The group is on schedule to meet our July 2021 target date for completion.

Communications

Objective: The Region 3 Trauma Network will develop a written contingency communication plan to be used when scheduling inter-facility transports during a radio or telephone failure. This plan/protocol will be developed by December 2021.

Progress: The region has begun investigating various communication platforms that may augment the traditional inter-facility transfer telephone call that typically takes place between referring and receiving trauma centers. The platforms that have been discussed and presented include the MI-HAN and RAVE notification systems, to notify when there is a loss of traditional communication tools. It was noted that many healthcare facilities have become proficient in the use of EMResource for reporting Emergency Department diversions as well as for various reporting requirements during the COVID-19 pandemic. The EMResource platform may serve as a potential adjunct communication tool. The region will continue to discuss and investigate alternative communication platforms to optimize existing resources while meeting this objective.

Infrastructure

Objective: The Region 3 Trauma Network has developed a Regional Trauma Transfer Checklist/Envelope that will be utilized by all Region 3 facilities. The tool is developed and currently in print. The target date for implementation is August 2021.

Progress: The Regional Trauma Transfer Checklist/Envelope has been distributed to all facilities within the region. The goal of these transfer envelopes is to minimize variability between regional hospital trauma transfer documentation and to ensure that needed documents are sent from the referring to the receiving trauma center. This objective has been implemented and discussed at the Region 3 Trauma Network meetings. It is the expectation that these transfer envelopes accompany every inter-facility trauma patient and is available at patient handoff. The Region 3 Trauma Network will monitor for its use and track any improvements in trauma data collection that may result.

Regional Performance Improvement

Objective: The Region 3 RPSRO will utilize the RPSRO Inventory as a tool to monitor the performance improvement of the trauma system.

Progress: The RPSRO Inventory tool has been presented to the Region 3 RPSRO. The inventory tool and its content have been reviewed and discussed as a key baseline measurement of trauma system function within the region. The Region 3 Trauma Registry Subcommittee has partnered with the State Trauma Registrar to address data quality and serve as a pilot study for any data irregularities within the reporting tool. The RPSRO Inventory tool has initiated valuable conversations regarding Emergency Department dwell time threshold goals for each level of trauma center within the region.

Continuum of Care

Objective: By December 2021, the Region 3 Trauma Network will establish a regional rehabilitation subcommittee as the first step to developing a plan for the integration of rehabilitation services into the regional trauma system.

Progress: The Region 3 Trauma Network has formed a Trauma Rehabilitation Subcommittee and have identified a chair and vice chairperson. The subcommittee has gathered information and created a spreadsheet regarding the availability of acute inpatient rehabilitation facilities within the region. The subcommittee has worked with various personnel to correctly identify patients requiring acute inpatient trauma rehabilitation at time of discharge. Discussions continue with trauma program managers, trauma medical directors, discharge planners, trauma registrars and health information management staff to better understand rehabilitation referral patterns. The goal of the region is to measure functional outcome as a performance indicator of the trauma system.

Trauma Education

Objective: The Region 3 Trauma Network will develop a list of recommended standardized trauma training courses for each discipline including EMS, nursing, and physicians. The education list will be in place by December 2021.

Progress: The Region 3 Education Subcommittee has met and discussed various trauma specific training courses for each discipline. The subcommittee has reviewed the American College of Surgeons recommended trauma courses such as Advanced Trauma Life Support (ATLS), Pre-Hospital Life Support (PHTLS), Trauma Nursing Core Course (TNCC), and Trauma Care After Resuscitation (TCAR). The subcommittee has discussed both required and recommended trauma specific education courses and how to encourage funding additional education opportunities. The subcommittee is on schedule to meeting this objectives target date of December 2021. Additionally, the group has begun to investigate the feasibility of having an online database of trauma related educational offerings to optimize the availability of trauma courses within the region.

Other relevant information:

The Region 3 Trauma Network continues to mature as a system. Recent discussions at regional meetings have led to the identification of a significant increase in penetrating trauma incidents throughout the region. The region has worked collaboratively with the state trauma registrar in creating multiple reports comparing the incidents of penetrating trauma from 2017-2020. Through these reports the region has identified an approximately 30% increase in penetrating trauma incidents in 2020. The region will continue to monitor this trend and has discussed injury prevention activities to address this concerning trend.

Administrative Rule Requirements:

- Yes No Quarterly meeting minutes on shared drive.
- Yes No All MCA's participating in the RTN.
- Yes No Performance improvement ongoing.